Automated Standard Form 52
U.S. Office of Personnel Management
FPM Supp. 296-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

PART A - Requesting Office *(Also complete Part B, Items 1, 7-22, 32, 33, 36 and 39.)*

1. Action Requested
Detail into 6/17/19 - 10/14/19

2. Request Number
AOP-2019-

3. For Additional Information Call *(Name and Telephone Number)*
Ramona Mullen

4. Proposed Effective Date

5. Action Requested By *(Typed Name, Title, Signature, and Request Date)*
Ryan T. Jackson, Chief of Staff 9/24/19

6. Action Authorized By *(Typed Name, title, signature, and Concurrence Date)*
Andrew R. Wheeler, Administrator 9/24/19

PART B - For Preparation of SF 50 *(Use only codes in FPM Supplement 292-1, Show all dates in month-day-year order.)*

1. Name *(Last, First, Middle)*
BECK, Nancy

2. Social Security Number | 3. Date of Birth | 4. Effective Date

FIRST ACTION		SECOND ACTION	
5-A. Code	5-B. Nature of Action	6-A. Code	6-B. Nature of Action
5-C. Code	5-D. Legal Authority	6-C. Code	6-D. Legal Authority
5-E. Code	5-F. Legal Authority	6-E. Code	6F. Legal Authority

7. FROM: Position Title and Number

8. Pay Plan	9. Occ Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis

12A. Basic Pay	12B. Locality Adj	12C. Adj. Basic Pay	12D. Other Pay

14. Name and Location of Position's Organization

15. TO: Position Title and Number
Policy Advisor to the National Economic Council

16. Pay Plan	17. Occ Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
GS	0301	15	01	$137,849.00	PA

20A. Basic Pay	20B. Locality Adj	20C. Adj. Basic Pay	20D. Other Pay

22. Name and Location of Position's Organization
US, White House

EMPLOYEE DATA

23. Veterans Preference
1 - None; 2 - 5-Point; 3 - 10-Point/Disability; 4 - 10-Point/Compensable; 5 - 10-Point/Other; 6 - 10-Point/Compensable/30%

24. Tenure
0 - None; 1 - Permanent; 2 - Conditional; 3 - Indefinite

25. Agency Use

26. Veterans Preference for RIF ☐ YES ☐ NO

27. FEGLI

28. Annuitant Indicator

29. Pay Rate Determinant

30. Retirement Plan

31. Service Comp. Date (Leave)

32. Work Schedule

33. Part-Time Hours Per Biweekly Pay Period

POSITION DATA

34. Position Occupied
1 - Competitive Service; 2 - Excepted Service; 3 - SES General; 4 - SES Career Reserved

35. FLSA Category
E - Exempt; N - Nonexempt

36. Appropriation Code
A0000000

37. Bargaining Unit Status

38. Duty Station Code

39. Duty Station *(City - County - State or Overseas Location)*
Washington, DC

40. AGENCY DATA	41.	42.	43.	44.

45. EDUCATIONAL LEVEL	46. YR.DEGREE ATTAINED	47. Academic Discipline	48. FUNCTIONAL CLASS	49. CITIZENSHIP 1-USA 8-OTHER	50. Vietnam Era Vet	51. SUPERVISORY STATUS

PART C - Reviews and Approvals *(Not to be used by requesting office.)*

1. Office/Function	Initials/Signature	Date	Office/Function	Initials/Signature	Date
A.			D.		
B.			E.		
C.			F.		

2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements.

Signature | Approval Date

CONTINUED ON REVERSE **OVER**

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